

L18 000 134 968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

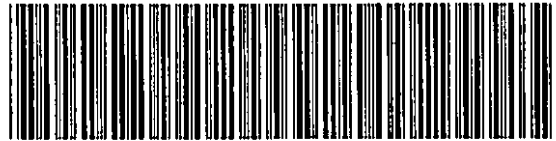
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 MAY 29 AM 11:21  
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TALLAHASSEE, FLORIDA

GB

W18-40898

D. O'KEEFE

JUN 01 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2018 MAY 29 PM 2:41

REGISTRATION  
COMMERCIAL  
SERVICES

May 2, 2018

SEAN M. DIXON  
14205 DENVER WEST CIRCLE, UNIT 4107  
LAKEWOOD, CO 80401

SUBJECT: PATRIOT HOUSING L.L.C.  
Ref. Number: W18000040898

We have received your document for PATRIOT HOUSING L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 718A00008973

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** Patriot Housing L.L.C.  
\_\_\_\_\_

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sean M. Dixon  
\_\_\_\_\_

Name of Person

Patriot Housing L.L.C.  
\_\_\_\_\_

Firm/Company

14205 Denver West Circle, Unit 4107  
\_\_\_\_\_

Address

Lakewood, CO. 80401  
\_\_\_\_\_

City/State and Zip Code

OVR1776@gmail.com  
\_\_\_\_\_

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sean M. Dixon  
\_\_\_\_\_

443  
\_\_\_\_\_

758-7481  
\_\_\_\_\_

at ( \_\_\_\_\_ )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☐

\$130.00 Filing Fee &  
Certificate of Status

☒

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐

\$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Patriot Housing L.L.C.

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

~~14205~~ 14205 Denver West Cir.  
Unit 4107, Lakewood, CO 80401

Mailing Address:

~~14205~~ 14205 Denver West Cir.  
Unit 4107 Lakewood, CO  
80401

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Mark A. Violette

Name

36008 Emerald Coast Parkway Suite 201

Florida street address (P.O. Box **NOT** acceptable)

Destin

FL

32541

City

State

Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..*

M. Violette

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

Sean Dixon, AMBR

**Name and Address:**

14205 Denver West Circle Unit 4107  
Lakewood, CO 80401

Abraham Lara, AMBF

14205 Denver West Circle Unit 4107  
Lakewood CO, 80401

Daniel Huhmann, AM

926 W Oceanview Ave Apt. C  
Norfolk, VA, 23503

Jeffery Archer, AMBF

1750 Manatee Court  
Merritt Island, FL 32952

(Use attachment if necessary)

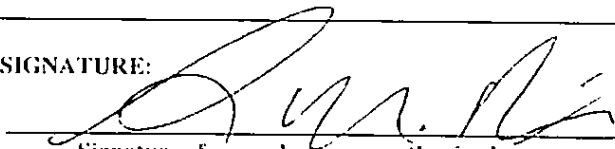
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_, (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any false information submitted in a document to the Department of State  
constitutes a third degree felony as provided for in s.817.155, F.S.

Sean M. Dixon

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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